Practice leadership is not a term that has been well defined in relation to services for people with learning disabilities. It is, however, a term that is used in other work environments to describe the act of leading staff in how to do a good job. Mansell et al (2004), defined practice leadership as the development and maintenance of good staff support for the people served, through:

- **Focusing**, in all aspects of their work, on the quality of life of the people served and how well staff support this.
- **Allocating and organising** staff to deliver better support, when and how the people being supported need and want it.
- **Coaching** staff to deliver better support by spending time with them providing feedback and modelling good practice.
- **Reviewing** the quality of support provided by individual staff in regular one-to-one supervision and finding ways to help staff improve it.
- **Utilising regular team meetings** to review our effectiveness in supporting people to engage in meaningful activities and relationships and to find ways to improve.”

You can watch the ‘What is Practice Leadership’ video by Julie Beadle-Brown, Professor in Intellectual and Developmental Disabilities by clicking here or go to bit.ly/2c8wtQx

In order to ensure that staff work together as an effective team, good leadership is required. Given that the people providing support need to work consistently and to the agenda of the individuals they serve, team leaders need to be able to support the development of staff knowledge and skills and to provide ongoing motivation and direction. We call this ‘practice leadership’ to distinguish it from the broader sense of management and leadership found in any organisation, to emphasise its focus on the quality of life of the individual served.

(Mansell & Beadle-Brown, 2012)
Why is it important?

The development of person centred support (including person centred planning, communication techniques and strategies, positive behaviour support and active support) is key to the provision of high quality services for people with learning disabilities. Achieving this requires frontline managers (practice leaders) to turn the theory of these approaches into practice and to support staff to implement them consistently.

United Response Way We Work evaluations tell us an increase in scores on the Active Support Measure (leading to an increase in engagement) are strongly related to and predicted by whether or not frontline managers provide strong practice leadership. Particularly important was whether or not managers regularly observe and model good support to staff and whether or not they focus on engagement and Person Centred Active Support in team meetings and supervisions.

Effective implementation and maintenance of person centred support requires more than the introduction of organising systems and paperwork. Telling people to do it isn’t enough – engaging with the people we support is often difficult and staff need the skills and motivation to make the rhetoric a reality. The most effective way to ensure those supported are receiving good support is for frontline managers to spend time teaching, guiding and leading staff in the provision of person centred support.

Who are practice leaders?

Organisations have a responsibility to create a climate in which staff know that the most important part of their job is providing effective person centred support. But it is the frontline managers and supervisors who have the most focused and critical practice leadership role.

Different organisational structures and job titles mean it can be difficult to identify who this primary practice leader is – whether team leader, service manager or location manager - but it is important that organisations are clear whose job it is, that the individual is aware that it is a key part of their role and that they do it.
What do practice leaders do?

Practice leadership is more than just coaching. It involves the communication of clear and consistent messages regarding values, expectations and effective performance management.

To enable us to promote and support this role in United Response we have operationalised the role of the practice leader as:

**Guiding - Providing direct guidance and organising available resources to enable effective and individual support by:**

- Maximising opportunities to model the behaviour and skills expected of staff in their work
- Coaching staff to develop better support by spending time with them providing demonstration, observation and feedback
- Developing a team which focuses on the delivery of consistent and effective support
- Organising staff and resources to deliver support when and how the people being supported need and want it.

**Showing the Way - Providing clear and relevant service specific expectations, by:**

- Ensuring the development of a shared understanding of the purpose of the service and the team
- Translating advice and requirements into practical, actionable guidance and support for those being supported and staff
- Reviewing the effectiveness of the team and its impact on the lives of the people they support
- Ensuring that team members are motivated and have the skills needed to work effectively with the people they support.
The graphic provides a visual reminder of how the important elements of practice leadership fit into two areas: *showing the way*, the yellow half, and *guiding*, the green top half.
Practice leaders need to develop and maintain a motivated team who have a clear vision which focuses on continually improving the quality of life of the people they support.

**Describing the vision**

Practice leaders need to describe a vision of what good support looks like and can achieve, in order to help team members understand what’s happening today in the context of the past and future … and in light of other people’s views, advice and perspectives.

A vision provides clear information about what the organisation’s values statements mean in practice for the individuals they are currently supporting and includes information derived from person centred plans and support profiles. Its development is a collaborative process which involves reflection and open discussion among the team, the people being supported, families and other stakeholders, to create a shared sense of what the service is for and what it seeks to achieve (i.e. what it does, how it does it and why). It is a public statement or promise that can be shared with others and reviewed regularly.

Practice leaders need to frequently articulate the values and principles that inform this vision of good support and to inform three further “showing the way” activities: translating, motivating and reviewing.
Translating

Teams receive information about what people need and what services should do from many sources, including:

◆ Guiding principles or goals from government policy documents such as Valuing People (2001) and Positive and Proactive Support (2014)

◆ Values statements from the organisation or from popular literature such as the Five Accomplishments (O’Brien & Tyne 1981)

◆ Contractual information and standards from their local authorities, funders and regulatory authorities, such as CQC

◆ Advice and guidelines on best practice from professional bodies e.g. NICE quality standards, The Positive Behaviour Support Competence Framework (2015)

◆ Specific advice and instructions regarding individual needs and/or support requirements from external experts (e.g. Speech and Language Therapists, Psychologists and other clinicians)

◆ Information on a range of interventions and approaches to support from training.

It can be difficult for staff to see how such information relates to their own experience and the individuals they support. This can lead to misunderstanding, oversimplification and/or misinterpretation. Effectively translating instructions, advice or training into “what it means here” and “how it fits with other priorities” is vital to the development of strong, robust support.

Good practice leaders use their vision of the purpose of support to help staff with this translation - by changing the language involved, by pointing out unnoticed similarities with existing practice, or by explaining it in the context of the actual people being supported.
Reviewing

Practice leaders have a particular responsibility for reviewing the implementation and impact of person centred support, which serves a number of important functions for the service and the people it supports including:

◆ Helping to identify what is important to each person and how well the support being provided matches their needs and preferences.
◆ Identifying the elements of support which are working and not working
◆ Continuing to utilise and develop successful support strategies and adjusting or revising elements of support that are ineffective.
◆ Providing information about the frequency and quality of activities and relationships which those being supported are involved in
◆ Providing early warnings about difficulties or reductions in the quality of support or the service being provided.

While there are often high levels of recording and monitoring in services, effective reviewing which results in more focused, consistent and effective support doesn’t happen often enough. The development of effective reviewing systems requires conscious effort and skill on the part of the practice leader.

As well as reviewing the current situation, good practice leaders also have a broader perspective of what’s been achieved in the past, and what might be possible in the future and they use this to enhance the process of reviewing support (see how far we’ve come) and to motivate staff (imagine what we can achieve) in maintaining or developing their practice.
Motivating

Individual and collective beliefs, attitudes and emotional responses to the people being supported are intrinsically linked to the failure to implement person centred support, particularly in services which support people who present behaviour described as challenging. The way staff feel about their job and the organisation they work for also has an impact on how motivated they are.

Staff performance is a product of their skills and motivation. If staff are to provide effective person centred support, practice leaders need to know whether the individuals in the team have the skills required to provide effective support and, if they do, whether they are motivated to work this way.

Since a failure to attend to these areas can lead to an ineffective team whose members are unable or unwilling to provide person centred support, one of the practice leader’s primary responsibilities is to motivate and energise their colleagues. Achieving this requires practice leaders to:

- take account of staff beliefs, attitudes and emotional responses to real-life situations and develop ways of working which change, control or manage those which are in conflict with the service vision or organisational values and requirements.
- develop a positive culture which recognises and celebrates success (however small) and encourages positive risk taking and problem solving.
- ensure that the consequences staff experience reflect a focus on effective person centred support.
- ensure individuals in the team have the skills they need to provide effective support and develop specialist knowledge within the team as required.

“If the team providing support cannot get training (including hands-on training), or if the training they are receiving is not followed up with good practice leadership, then the difficulties they will face in trying to support individuals with more complex needs are likely to wear away at their ability to sustain their performance.”

Mansell & Beadle-Brown 2012
Practice leaders need to work directly with staff to help them improve their practice ("guiding"). "Guiding" is not an office based activity – it’s something that practice leaders do with staff in their real work situations.

**Coaching**

(Demonstration – Observation – Feedback)

The best way to help staff shape up skilled support is for practice leaders to spend time with every member of the team, demonstrating good support (this is how it’s done), observing them delivering the same support (now, you do it) and providing feedback to them on their performance (what you did well… what you need to try next time…), in an ongoing coaching cycle. It can also be useful for practice leaders to encourage skilled staff to coach each other.

When we know what needs to be improved, and we have an effective relationship with the team member concerned then the next step for the coach is to explain how specific support should be provided and why this is important (support plans or interaction profiles could be used as the basis for this). The coach will then demonstrate how to do this effectively.

Next the coach needs to observe the team member doing the same or similar thing.

Sometimes it is possible to do this in one session but, if the activity has already been completed with support from the coach, it may be necessary to plan for another opportunity when the person being supported wants or needs to do the activity again.

During the observation the coach needs to note any ‘successful strategies’ and ‘helpful hints’.

Having observed the team member, the coach needs to clearly describe their practice and identify specific performance improvements.

Related to demonstration-observation-feedback are three other “guiding” practice leadership activities: being a good role model, facilitating effective team work, and organising.
Role Modelling

Practice leaders are good support workers, and they consistently demonstrate that they are. Being a good role model enables practice leaders to show they know what they’re talking about and that good support is something that matters to them.

Effective role modelling requires practice leaders to be aware of the impact of their own behaviour whenever they are supporting people and to be able to identify and exhibit good support practices at all times, which requires considerable practice skills and knowledge.

This does not, however mean every interaction or activity supported by practice leaders needs to be perfect and go exactly right every time – modelling the use of incidental opportunities to support people to engage in activities, positive risk taking and learning from experience are also valuable for all staff.

Clement & Bigby (2010) describe two different forms of modelling by managers:

Passive modelling – using everyday opportunities to demonstrate good practice so that staff will pick up on this and learn that this is the way they are expected to behave.

Active modelling – using incidental opportunities (e.g. new activities are taking place, problems occur or poor practice is seen) during the shift or a visit to the service to demonstrate how staff should be working.

Practice leaders need to use passive and active modelling frequently to reinforce the message that supporting people effectively is the core objective of the service and develop a shared understanding about how this is achieved.

You can watch the ‘Practice Leadership and Role Modelling’ video here or go to bit.ly/2bTfSB2

Being a good role model involves

◆ The consistent demonstration of good support
◆ Displaying confidence in the provision of support
◆ Demonstrating a willingness to try things out
◆ Demonstrating openness to learning from failure and their own mistakes
◆ Encouraging a healthy balance between consistency and creativity, and a culture of mutual support and collective improvement.
Facilitating Effective Team Work

Practice leaders also need to spend time with staff helping them work effectively as a team and to focus their collective effort on people they support. This is important because support provided by a number of individuals is always vulnerable to variation and the inconsistencies that can make it difficult for the people they support to participate successfully.

Practice leaders ensure the team establishes with the people being supported, their preferred way of doing things and make it incumbent on all staff to adopt these support styles, techniques and approaches, rather than expecting the person to change according to who is supporting them. Achieving this requires practice leaders to:

◆ focus on the effectiveness of the whole team in supporting people in order to identify and minimise areas of inconsistency
◆ stress that the support people receive is more important than any disagreements or potential misunderstandings between staff
◆ work to reduce conflict between team members, enabling team members to clarify and improve their working relationships.

“Consistency – being treated in the same way by different people providing support is important for most people. It matters because everyone providing support ought to be doing so in the way the person they are helping prefers or is most comfortable with. If people do different things in different ways, it can also make it harder for the individual to work out what he or she needs to do.”

Mansell et. al. 2004
Organising

Practice leaders have a key job in allocating the resources available to ensure, as much as possible, those being supported consistently get the right support when they want and/or need it. To achieve this they need to recognise the resources available (including staff and others, time, materials, the environment and money) and devote an amount of time to the practicalities of their co-ordination.

Effective planning and organising of the resources available requires the practice leader to work closely with the team to:

◆ provide a responsive and flexible plan for what’s going to happen throughout the day, which promotes participation in a range of activities and reflects individuals’ person centred goals and is communicated and accessible to the people being supported, staff and others.

◆ produce relevant, up-to-date, individualised support plans, which are based on appropriate assessments (i.e. identifying strengths and support needs rather than focusing on deficits/weaknesses) in the following areas (as appropriate):
  – skills and interests
  – support preferences
  – health and physical needs
  – communication
  – sensory issues
  – behaviour

◆ ensure the availability and use of tools, resources and equipment (including communication aids and assistive technology)

◆ identify and facilitate assistance from other professionals

◆ maximise the use of un-paid support, social networks and community opportunities/resources

Practice leaders must be mindful that while written plans and records are helpful in organising a team to provide person centred support, they are job-aids not outcomes. They also need to ensure written plans and routines are person centred and responsive to changing needs and circumstances so they do not become regimented and/or so rigid they become institutional.

“...written plans and records do have a part to play in helping staff provide support in the best way, both as a prompt or cue to do the right thing and as the basis for discussion and review. However our experience is that there is such a great risk of written plans and records being seen as an end in themselves that they should not be relied on upon as evidence of anything other than writing”
(Mansell & Beadle-Brown, 2012)
What needs to happen now?

Practice leadership is a critical element in the development of person centred support (including person centred planning, total communication, positive behaviour support and active support) in services for people with learning disabilities.

While front-line managers are increasingly aware of the need for practice leadership, a significant number struggle to develop this role against a background of many other claims on their time and resources, not least those arising from administrative requirements and external pressures.

This means that attention needs to be given to the recruitment, training, career development and support of practice leaders, and also to how their time is protected from the many other competing responsibilities in this important work.

While priorities for front-line managers may well need to be reviewed and debated in the sector more widely, social care organisations need to recognise that Practice Leadership must be provided despite, not neglected because of, resource limitations.

“Practice leadership is a central issue in enabling people providing support to do a good job for people with severe and profound intellectual disabilities. “They are the custodians of the vision of the team and its culture”
Mansell & Beadle-Brown (2012)

Practice leadership is associated with staff experiences of lower stress and greater positive experiences in team work, job satisfaction and trust in manager.
Deveau & McGill, 2016
References:


Positive Behaviour Support

Positive Behaviour Support involves changing the way we respond to difficult circumstances and that the person being denied access to, ordinary community facilities. The likelihood that challenging behaviours will occur.

This comprehensive resource provides real life examples accompanied by expert commentary illustrating the subtleties of these techniques.

The DVD is available from United Response (www.unitedresponse.org.uk) at a subsidised cost of £15.00 per disc.

DVD running time – 2 hrs 22 mins

The DVD has been enhanced by a suite of best practice resources that provide the theoretical background to the approaches demonstrated within the DVD.

These resources are available free to download from the United Response website (www.unitedresponse.org.uk). They provide clear, practical and engaging descriptions of Active Support, Positive Behaviour Support and Working with Communities, and are designed to be of immediate use to everyone who supports people with a learning disability and other vulnerable individuals.

Also available for free:

Positive Behaviour Support and Active Support: Essential elements in achieving real change in services for people whose behaviour is described as challenging. This booklet describes the benefits of Active Support for people with challenging behaviour, along with its role in laying the foundations for the effective implementation of Positive Behaviour Support.

www.unitedresponse.org.uk